Effective October 1, 2001 Oq/\$56393												
		CLAIMS AS	mn 2)	SMAL TYPE		YTITY	OR	OTHER THAN SMALL ENTITY				
TC	TAL CLAIMS						RA	ΓE	FEE	1 1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE 370.00		OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	p mir	us 20=	*		X\$	9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	\mathcal{Z} mi	nus 3 =	*		X4:	2=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT			+14	0=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								AL	<u> </u>	OR	TOTAL	761
CLAIMS AS AMENDED - PART II										1	OTHER	THAN
	prome to the demandation from the specialistic to the same company	(Column 1)	(Column 2) (Column 3)				SMA	LL I	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	ſΈ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE/
NDN	Total	* 10	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	* J	Minus	***	CL AIM		X42	?=		OR	X84=	
	TINOTTREGE	INTATION OF IM	SLIFLE DE	EINDEINI	CLAIIVI		+14)=		OR	+280=	
								TAL		OR	TOTAL	
		(Column 1)		(Colur	nn 2)	(Column 3)	ADDIT.	reel		1 /	ADDIT. FEE	
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		= '	X\$ 9)=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CLAIM	=	X42	=		OR	X84=	
	THOTTHEOL	IVATION OF INC		ENDER! CLAIM			+140)=		OR	+280=	" - "
			•				TO ADDIT. I	TAL		OR,	TOTAL ADDIT. FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)	7,0011.1			,	NODII. I EE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***	. OL A114	=	X42:	=		OR	X84=	
	FIRST PRESE	INTALION OF MU	JETIPLE DEF	ENDENT	CLAIM;		.140	_		Ī		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										L		
**	f the "Highest Nu If the "Highest Nu	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM: Add										
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Application or Docket Number

								_[Annlicati	ion or	Docket N			
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									Application or Docket Number					
_									\mathcal{D}_{i}		856	393		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY				OTHER THAN		
T	OTAL CLAIM	IS	1		<u></u>	idiiii 2)	l	RATE FEE			OR SMALLE			
F	OR		NUMBE	R FILED	NUN	BER EXTRA	1 H	BASIC FEE			RATE			
Ţ	OTAL CHARG	EABLE CLAIMS	12 "	ninus 20=			 			-101	BASIC FE	LEC		
IN	DEPENDENT	CLAIMS		ninus 3 =	-		X\$ 9=		<u> </u>	_ OF	X\$18=			
М	ULTIPLE DEPE	NDENT CLAIM								OF	X80=			
• 1	the difference	e in column 1 i	io logio the co	logic About a superior			+	135=	1	OF	+270=	/		
	* If the difference in column 1 is less than zero, enter "0" in column 2							OTAL		OF	R TOTAL	XL		
	•	(Column 1)		MENDED - PART II								R THAN		
٦		CLAIMS REMAINING		(Colun	EST	(Column 3)	21	WALL	ENTITY	_	SMALL	ENTITY		
AMENDMENT A	-	AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE		
END	Total	ļ	Minus	ļ ··		=	X	\$9≃		OR	X\$18=			
¥	Independent	ENTATION OF M	Minus			=	X	40=	1	OR	X80=	 -		
		ENTANOI OF W	OLTIPLE DE	PENDENT	CLAIM			35=	 	1	 	 		
							<u> </u>	OTAL		OR	+270= TOTAL			
		(Column 1)		(Colum	n 21	(Column 3)		T. FEE		OR	ADDIT. FEE	<u> </u>		
20		CLAIMS REMAINING	200	HIGHE NUMBI	ST				ADDI-	7 i		1.55		
AMENOMENI	Total	AFTER AMENDMENT		PREVIOL PAID FO	JSLY	PRESENT EXTRA	RA	TE.	TIONAL FEE		RATE	ADDI- TIONAL FEE		
EN	Independent	·	Minus	**		=	X\$	9=		OR	X\$18=			
Z Z		NTATION OF M	Minus	PENDENT	N AIAA	=	X4	0=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1 1	+270=			
•								OTAL		OR	+270=			
		(Column 1)		(Columr	1 2)	(Column 3)	ADDIT	. FEE I		OR	ADDIT, FEE	<u> </u>		
	· j · · · · · · .	CLAIMS REMAINING	29	HIGHES NUMBE	ST I			_	ADDI-					
	: Been a	AFTER AMENDMENT	To be the state of	PREVIOU PAID FO	SLY	PRESENT EXTRA	RA	ΓE	TIONAL		RATE	ADDI- TIONAL FEE		
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		TATION OF MIC	DETIPLE DEP	ENDENT C	LAIM		<u> </u>	\dashv		OR	∧ov=			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR +270= TOTAL ADDIT FEE														
11	the "Highest Nur	nber Previously Pa	id For IN THIS	SPACE is le	ss than	20, enter "20."	ADDIT I	FFF]	OR A	TOTAL DDIT. FEE			
••	"griest HUIII	ber Previously Paid	ror (fotal or	Independent)	is the h	ighest number to	ound in th	e appr	opriate box	in colu	mn 1.			